8/14/2018

(A)

Division of Corporations



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Division of Corporations

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Account Number : FCA000000023 : (514)280-3338 Phone : (954)208-0845 Fax Number

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

AlphaPeak Brokerage, LLC			
(Name of the Limited Liability (A Florida	Company as it now appear Limited Limbility Company)	s on our records	.)
(21 10) 100	(3)(1)(1)(1)(1)(1)(1)(1)(1)(1)(1)(1)(1)(1)		
The Articles of Organization for this Limited Liability Co	ompany were filed on	7/13/2004	and assigned
Florida document number L04000051638			
forida document number	,_ -		
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limit	ed liability company he	ere:	-A
GF Investment Services, LLC			5 6 6 C
The new name must be distinguishable and contain the words "Limit	ted Liability Company," the o	esignation "LLC"	or the abbreviation "L.I.C."
Enter new principal offices address, if applicable:	····································		FM
(Principal office address MUST BE A STREET ADDR	<u>ESS)</u>	······································	
			125 F
			5 m 5
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)			
B. If amending the registered agent and/or regist registered agent and/or the new registered office addr	ered office address or ess here:	our records	, enter the name of the no
Name of New Registered Agent:			
New Registered Office Address:	Enter Flo	rida street address	
	0.00	, Flo	orida Zip Code
	City		2.17 t.oue
New Registered Agent's Signature, if changing Registered	Agent:		
I hereby accept the appointment as registered agent or provisions of all statutes relative to the proper and co accept the obligations of my position as registered ag being filed to merely reflect a change in the registered company has been notified in writing of this change.	omplete performance of ent as provided for in ('my duties, an Chapter 605, I	d Lam familiar with and F.S. Or, if this document is
	If Changing Registered A	gent, Signature o	f New Registered Agent

MGR = Manager

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

AMBR = 1	Authorized Member		
Title	<u>Name</u>	Address	Type of Action
			□ Remove
			☐ Change
			D Add
			□ Remove
			□ Change
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	August 13		2018				
ited	August 15		.,	<u> </u>			
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		Signature of a	member or autho	rized representati	ve of a member		

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